

THOMAS L. GARTHWAITE, M.D. Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES 313 N. Figueroa, Los Angeles, CA 90012 (213) 240-8101

May 19, 2005

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, California 90012

Dear Supervisors:

# APPROVAL TO ACCEPT A GRANT AWARD FROM QUEENSCARE FOR UNCOMPENSATED EMERGENCY ROOM SERVICES PROVIDED AT LAC+USC HEALTHCARE NETWORK FOR FISCAL YEAR 2003-04

(First District) (3 Votes)

# IT IS RECOMMENDED THAT FOLLOWING THE PUBLIC HEARING YOUR BOARD:

Approve and instruct the Director of Health Services, or his authorized designee, to accept and sign a grant award, substantially similar to Exhibit I, from QueensCare to the LAC+USC Healthcare Network to provide financial support to cover uncompensated expenditures for emergency room services provided in Fiscal Year 2003-04, to medically indigent patients who reside in QueensCare's primary service area, in the amount of \$716,046, at no net County cost.

#### PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION:

Acceptance of the grant award will provide \$716,046, for uncompensated emergency room services provided at LAC+USC Healthcare Network (LAC+USC) during Fiscal Year (FY) 2003-04.

Gloria Molina First District

Yvonne Brathwaite Burke Second District

> Zev Yaroslavsky Third District

Don Knabe Fourth District

Michael D. Antonovich Fifth District The Honorable Board of Supervisors May 19, 2005 Page 2

#### FISCAL IMPACT/FINANCING:

The QueensCare grant provides a total of \$716,046 to LAC+USC Healthcare Network for services provided in FY 2003-04, at no net County cost.

### FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

QueensCare notified the Department of Health Services in late 2003 about their emergency room service fund and the possibility of providing an "Emergency Medical Services" grant to LAC+USC to offset its costs in providing emergency room services to uninsured, medically indigent patients residing within QueensCare's primary service area during FY 2003-04.

To be eligible to receive these funds from QueensCare, emergency room services, except those in conflict with the Catholic Bishop's Directive, must have been provided to a medically indigent patient (defined as a person whose family income is at or below 200% of the federal poverty level and who does not qualify for reimbursement from any payor including governmental reimbursement programs) who resides in QueensCare's primary service area (zip codes: 90004, 90005, 90006, 90020, 90026, 90027, 90028, 90029, 90038, and 90057).

On January 26, 2005, LAC+USC identified the number of medically indigent patients residing in QueensCare's primary service area to whom they had provided emergency room services and the amount of the associated uncompensated expenditures.

On March 22, 2005, QueensCare informed LAC+USC that QueensCare (Charitable Division) would award LAC+USC an "Emergency Medical Services" grant in the amount of \$716,046.

The grant (Exhibit I) has been reviewed and approved as to form by County Counsel.

Attachment A provides additional information. Attachment B is the Grant Management Statement, which the Board instructed all County Departments to include in all Board letters for grant awards exceeding \$100,000.

#### **CONTRACTING PROCESS**

Not applicable. It is not appropriate to advertise grant awards on the Los Angeles (L.A.) County Online Web Site as a contract/business opportunity.

## IMPACT ON CURRENT SERVICES (OR PROJECTS)

Approval of the recommended action will assist LAC+USC in continuing to provide emergency services to uninsured low-income patients.

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When approved, this Department requires three signed copies of the Board's action.

Respectfully submitted,

Thomas I. Garthwaite, M.D./
Director and Chief Medical Officer

TLG:gti

Attachments (3)

c: Chief Administrative Officer County Counsel Executive Officer, Board of Supervisors

**BLCDUSC.GI** 

# **SUMMARY OF AGREEMENT**

#### 1. TYPE OF SERVICES:

A grant from QueensCare for uncompensated emergency room services provided to indigent patients at LAC+USC during Fiscal Year 2003-04.

#### 2. AGENCY INFORMATION:

QueensCare (Charitable Division) 1300 North Vermont Avenue, Suite 1002 Los Angeles, California 90027-6005 Attention: Ms. Eleanor Aguilar

Vice President Programs

Telephone Number: (323) 953-7333

Facsimile (FAX) Number: (323) 953-6244

Electronic Mail (e-mail) Address: eaguilar@queenscare.org

#### 3. FINANCIAL INFORMATION:

The QueensCare grant provides a total of \$716,046 to LAC+USC Healthcare Network for services provided in FY 2003-04, at no net County cost.

#### 4. GEOGRAPHIC AREA TO BE SERVED:

LAC+USC Healthcare Network.

#### 5. DESIGNATED ACCOUNTABLE FOR PROJECT MONITORING:

Pete Delgado, Chief Executive Officer, LAC+USC Healthcare Network.

#### 6. APPROVALS:

LAC+USC Healthcare Network: Pete Delgado, Chief Executive Officer

Contract and Grants Division: Cara O'Neill, Chief

County Counsel (approval as to form): Elizabeth J. Friedman, Senior Deputy County

Counsel

# Los Angeles County Chief Administrative Office Grant Management Statement for Grants Exceeding \$100,000

Department: Health	Services							
Grant Project Title and 1	Description							
QueensCare Grant Awa County + University of	rd for Emergency Room			Provid	ed at t	he Lo	s Angeles	
Funding Agency Program (Fed. Grant #/State Bill or Code #)					Grant Acceptance Deadline			
QueensCare	None				None			
Total Amount of Grant	Funding: \$714,046		County Match Requ	uiremer	nts	None	<b>;</b>	
Grant Period: 7/01/03	6-6/30/04 Begin Date:	07/01/03	End Date	e:	06/30	)/04		
Number of Personnel H	ired Under this Grant:	None	Full Time	0	Part '	Гime	0	
	Obligations Imposed	on the County	When the Grant Ex	<u>pires</u>				
Will all personnel hired	for this program be info	ormed this is a g	rant funded program	? Yes		No	X	
Will all personnel hired	for this program be pla	ced on temporar	y ("N") items?	Yes		No	X	
Is the County obligated	to continue this program	n after the grant	expires	Yes		No	X	
If the County is not obli	gated to continue this p	rogram after the	grant expires, the De	partme	nt wil	1:		
a). Absorb the program	cost without reducing of	other services		Yes	<u>X</u>	No	and the second s	
b). Identify other reven	ue sources			Yes	X	No	******	
(Describe) LAC+U	JSC Healthcare Networ	k budget.						
c). Eliminate or reduce	, as appropriate, position	ns/program costs	s funded by this grant	t. Yes	NA	No	Name and the STATE AND THE STA	
Impact of additional per	rsonnel on existing space	e:						
Other requirements not	mentioned above	0						
Department Head Signa	ature			Da	te			

Bringing Healthcare to the Community

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March 22, 2005

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Mr. Pete Delgado Chief Executive Officer LAC+USC Healthcare Network 1200 North State Street Los Angeles, CA 90033

SUBJECT: \$ 716,046 Emergency Medical Services Agreement

Dear Mr. Delgado,

We are pleased to inform you that the Board of the Charitable Division of QueensCare has approved an Emergency Medical Services grant in the amount of \$ 716,046 to LAC+USC Healthcare Network. The terms and conditions of the grant are as follows:

- 1) Payment: This grant is payable in a single installment which is enclosed. You are not required to open a separate account for our grant monies. This grant is subject to audit at our expense.
- 2) Purpose: The grant is for uncompensated emergency room care for medically indigent persons residing within the QueensCare primary service area during your fiscal year ending 2004 as identified in your January 26, 2005 letter. In all cases, beneficiaries of services provided by this funding must be residents of QueensCare's primary service area (zip codes 90004, 90005, 90006, 90020, 90026, 90027, 20028, 90029, 90038, 90057), and must be medically indigent which is defined as those whose family's annual income is at or below 200% of the federal poverty level and who does not qualify for reimbursement from any payor including governmental reimbursement programs.

No portion of this funding may be used to provide heterologous fertilization, artificial insemination, abortion, the destruction of human embryos, direct sterilization, and similar procedures, except when in the absolute discretion of QueensCare ethicist, the operations, treatments, and medications that have as their direct purpose the cure of a proportionately serious pathological condition of a pregnant woman are permitted when they cannot be safely postponed until the unborn child is viable, even if they will result in the death of the unborn child

3) Grant Period: This grant is for your fiscal year ending 2004. QueensCare has a policy of not considering an additional request from an organization that has an open

- 4) Warranties: You warrant that you are a general acute care hospital which operates an Emergency Room other than a stand-by emergency room and that the information you have provided in connection with this grant is true and correct.
- 5) <u>Lobbying</u>: You also warrant that none of the funds will be used to influence legislation unless permitted by law.
- 6) Reporting: You agree to provide any requested information in the event that QueensCare is audited by the Attorney General or any other oversight authority. For this purpose, you are required to maintain supporting documents, in an auditable condition, for a period of not less than seven years.
- 7) <u>Publicity</u>: QueensCare reserves the right to publicize the grant in any manner which it deems appropriate. Should you choose to release a public announcement pertaining to this grant, the proposed release must be submitted to QueensCare in advance for review and comment. All printed material with substantial reference to the program will acknowledge QueensCare's support.
- 8) <u>Compliance</u>: Failure to comply with any of the terms of this agreement may result in one or more of the following actions.
- QueensCare may require reimbursement of any of the funds not used for approved purposes.
- QueensCare may require repayment of all unexpended grant funds.

It is the policy of QueensCare to discourage grantees from making gifts to QueensCare personnel, giving honoraria in any form, or sending plaques or other memorabilia.

We wish you continuing success in meeting healthcare needs in our community. If you have any further questions, feel free to call at your convenience. If these terms meet your approval, please sign the enclosed copy of this letter and return to the address shown above. The original is for your records. Thank you.

Yours truly,
Ceruy A Bonecular
Terry A. Bonecutter
President
Chief Executive Officer
TAB/:en
Accepted:
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Name:
Title:
Date: